1100 (m = 5)

PTO/SB/81 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/585,013 June 29, 2006 **Filing Date POWER OF ATTORNEY** Roberto ETCHENIQUE First Named Inventor and **CORRESPONDENCE ADDRESS** PHOTOLABILE COMPOUNDS INDICATION FORM **Art Unit** NA **Examiner Name** Not Yet Assigned 19240.200 US2 Attorney Docket No. I hereby revoke all previous powers of attorney given in the above-identified application. I hereby appoint: Practitioners associated with the Customer Number: 56949 Х Practitioner(s) named below: Registration Number Registration Number Name Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR Firm or Individual Name Address Zip City State Email Telephone Country I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. x Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Date Signature Telephone Name SCOT G HAMILTON SENIOR DIRECTOR Title and Company NOTE: Signatures of all the inventors of assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

forms are submitted.

\*Total of